

## **LICENSING PRACTICE GUIDE**

To be used in conjunction with [DCF Policy 20-2](#)

### **The Private Provider Licensing Process**

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#### **Useful Terms and Definitions**

##### **Amendments to the License -**

Amendments are changes to conditions under which a license is issued, including but not limited to, licensed bed capacity, age range or gender of client population.

##### **Closing Admissions -**

Closing admissions means that no additional residents may be admitted to the facility regardless of referral source.

##### **Limiting Admissions by Suspending DCF Referrals -**

Limiting admissions means DCF has determined that it will not refer its clients to the facility or program, either temporarily or permanently, or it will restrict the age or gender of DCF clients referred. This is not an adverse licensing action that requires notice and an administrative hearing because the facility's or program's ability to accept referrals from other sources is not impacted. However, limiting admissions does require the Commissioner's approval.

##### **Non-Renewal of a License -**

A non-renewal of a license may occur if, at the time a facility or program applies for renewal of its license, the Department finds that the licensee is unable to comply with applicable regulations.

##### **Revocation -**

A license revocation is the permanent removal of a license for a particular program or facility. All services provided under the license must cease and all residents of the facility must be removed.

##### **Summary Suspension -**

A summary suspension occurs when a licensee is ordered to immediately cease all services provided under the license and all residents are removed based on emergency health and safety risks. DCF shall issue a notice of intent to revoke the license simultaneously with the notice of summary suspension.

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#### Process

The Licensing Unit of the Department of Children and Families' Office of Legal Affairs shall be responsible for the licensing of privately-operated child caring (congregate care) facilities, child placing agencies, extended day treatment facilities, permanent family residences, and out-patient psychiatric clinics for children. The Licensing Unit shall also be responsible for monitoring these facilities and agencies for compliance with state law and the Regulations of Connecticut State Agencies, and for taking adverse licensing actions if warranted.

The Licensing Unit shall also be responsible for the approval of out-of-state child placing agencies wishing to place children with Connecticut adoptive families.

**Note:** This approval only allows the out-of-state child placing agency to place a child; it does not allow the agency to approve a Connecticut family for foster care or adoption, which can only be done by a child placing agency located in Connecticut and licensed by the Department.

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#### Inquiries

When a provider requests information about the licensing process, the following procedure shall be used:

Inquiries from existing providers:

- instruct provider to send a letter to the Licensing Program Manager requesting an application packet;
- direct the provider to the DCF Licensing website for additional information; and
- if the provider wishes to apply for a license for a program it has not previously operated (*e.g.*, a residential facility applying for an out-patient psychiatric clinic license), inform the provider that they must schedule a Technical Assistance (TA) meeting.

Inquiries from new providers with no existing contracts:

- direct the interested party to the Licensing Program Manager, who shall document the call on the Licensing Inquiry Form.

**Note:** The form includes: name, title of person, address, e-mail, website (if applicable), date of call, time of call and phone number.

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#### **Inquiries (Continued)**

- direct the caller to the DCF Licensing website which includes information on the following topics:
    - Requests for Proposals process;
    - information on requirement that there be sufficient finances for four months of operation;
    - required background checks;
    - provision of education to residents;
    - licensure and experience requirements for each license;
    - hiring and training of staff before being paid;
    - statement that license is no guarantee of utilization by DCF;
    - necessary approvals;
    - zoning, health, fire and building permits;
    - Certificates of Occupancy;
    - insurance;
    - formation of corporate entity;
    - board of directors;
    - required policy and procedures manual;
    - physical plant requirements;
    - regulations and statutes;
    - program description; and
    - quality assurance requirements, if applicable.
  - the Licensing Program Manager shall inform prospective licensees that, after they have reviewed the Licensing website, they must schedule a Technical Assistance (TA) meeting.
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#### **Technical Assistance Meeting**

All prospective providers who have never been licensed by DCF or who have not been licensed for the activity currently being proposed (*e.g.*, a residential facility applying for an outpatient psychiatric clinic license), shall be required to participate in a Technical Assistance (TA) meeting.

The following documents must be brought to the TA meeting by the prospective provider:

- program description;
- staffing description, including education and experience requirements for each position;
- sample budget; and
- description of the physical plant and property.

The TA meeting shall be the provider's opportunity to ask questions and the Licensing Unit's opportunity to provide further direction.

At the end of the TA meeting, the prospective provider shall be instructed to send a formal written request for an application to the Licensing Program Manager if it is still interested in pursuing the license.

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#### **Written Requests**

When a formal written request for an application is received, the Licensing Program Manager shall send the prospective applicant an application packet and identify the name of the assigned Licensing Unit Regulatory Consultant.

If the prospective applicant is currently licensed by DCF, then the currently assigned Licensing Unit Regulatory Consultant shall provide technical assistance as needed to the applicant in order to complete the application packet.

Technical assistance may include visiting the proposed program site in order to approve the location for the intended use.

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#### **Expansion of an Existing License**

If a licensed agency wishes to expand its current services under an existing license, the licensee shall apply for such expansion using the DCF Application Form. The currently-assigned Licensing Unit Regulatory Consultant shall visit the site and/or provide other technical assistance prior to the receipt of the application. The Regulatory Consultant shall inform the Licensing Program Manager of the licensee's intent and of any actions taken by the Regulatory Consultant.

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#### **Initial Application Phase**

The filing and storage of documents related to the application packet will take place using the DAS BizNet program (<https://www.biznet.ct.gov/AccountMaint/Login.aspx>). Documents related to licensing visits and correspondence will be filed in hard copy at DCF Central Office and in the LINK system.

When a licensing application packet is received:

- The Licensing Program Manager shall assign it to a Regulatory Consultant.
  - The Regulatory Consultant shall review the packet and advise the applicant of any missing components or areas that need revision. The review shall include a review of the applicant's policy manuals, quality assurance plan (if applicable), and training plan (if applicable). The review shall ensure that all documents required on the Application Checklist are completed. For health and fire approvals, floor plans must be included for each building inspected.
  - The Regulatory Consultant shall schedule an on-site visit to the program or facility during the review of the application packet in order to facilitate the timely completion of the initial licensing process.
  - For all congregate care facilities, a plan for the education of children shall be included. The plan shall include an educational setting that is approved by the State Department of Education. If the applicant will be educating children in its own school, the school must be approved by the State Department of Education prior to the applicant receiving an initial license. If the applicant is applying for a license as a "Child Caring Facility - Residential Treatment" program, the applicant must have an on-site educational program that is approved by the State Department of Education.
  - The assigned Regulatory Consultant, after having completed his or her review, shall submit the packet to the Licensing Program Manager for final review. If the application is found to be incomplete, the packet shall be returned to the assigned Regulatory Consultant for further follow-up with the applicant.
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#### **Determination of Fiscal Viability**

The applicant must be able to demonstrate sufficient fiscal viability to start up and sustain the program. This may be done through documentation submitted to DCF as a result of a pre-existing relationship. If the applicant does not have a pre-existing relationship with DCF, the applicant must provide a detailed budget for the new program with a description of its intended referral sources along with evidence of at least four months of funding for the new program.

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#### **Initial Inspection Phase**

Once the applicant has submitted a completed application, the Regulatory Consultant shall schedule an on-site visit to the facility or program. The on-site activities may require more than one visit to the facility or program.

The following areas will be reviewed during the on-site visit:

- **Physical Plant:** The building shall be completely furnished and ready to open before a provisional license will be issued. The behavioral, developmental and medical characteristics of the children to be served shall be taken into account when determining the adequacy and safety of the physical plant. (See DCF Regulations and Guidance for further details.)
  - **Medication Administration:** The medication administration area and record keeping system must be in compliance with all requirements listed in the DCF Medication Administration Guidelines. For child caring facilities, the facility or agency must have sufficient Medication Administration-certified staff in order to ensure that all medication administration times are covered. If the facility does not have a medication administration-certified staff member on site, then the facility must have a plan to ensure that a medication administration-certified staff member is on-call and can arrive at the facility or agency to administer medications as needed.
  - **Physical Restraint and CPR Training:** The facility or agency must ensure that each shift has at least two staff on duty who are trained in the proper use of physical restraint and at least one staff member who is trained in CPR.
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#### Personnel Files

For initial licensure, the personnel files of all facility staff listed on the DCF Staff Schedule A shall be reviewed. At the time of relicensure, the personnel files of all staff who have been hired within the previous two years shall be reviewed.

The personnel files shall contain:

- the results of child protective services and State Police background checks;
- reports of physical exams, TB tests and any other required medical documentation;
- documentation of completion of all required training, including physical restraint training;
- required sign-offs for receipt of mandated reporter, confidentiality and patient's rights statutes;
- a copy of any license or certification required for the position; and
- any other documentation required by the Regulations of Connecticut State Agencies or the facility or agency's policies.

**Note:** If it is determined that any personnel file does not contain the required State Police and CPS background checks, the facility or program shall be required to immediately obtain such checks and to submit a corrective action plan setting forth its plan for full compliance in the future.

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#### Sample Case Records

Each applicant must prepare a sample case record in the format required in the applicable sections of the Regulations of Connecticut State Agencies.

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#### **License Issuance Decision Phase**

If the applicant has demonstrated that it is in compliance with all of the requirements, an initial license may be issued.

All initial licenses, except for out-patient psychiatric clinics for children (OPCCs), are provisional licenses.

For child caring facilities (CCFs), the initial provisional license shall allow a licensed bed capacity (LBC) that is below the intended full capacity for the program. For example, a six-bed group home may be licensed initially for two or three residents. In determining the LBC for the initial license, the following shall be considered:

- What is the intended full capacity?
- How many of the program staff have been hired and trained?
- What is the facility's implementation plan for bringing new children into the program?
- How will the facility staff the program as the census increases?

The implementation plan must be in writing and approved by the Licensing Unit.

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#### **License Issuance Decision Phase**

For extended day treatment programs (EDT) and CCFs, the assigned Regulatory Consultant shall visit the program in order to assess its readiness to increase bed capacity and shall take the following into consideration:

- turnover in child care staff;
- turnover in supervisory, management and clinical staff;
- current vacancies in staffing at all levels;
- status of staff training;
- medication administration coverage;
- performance of medication administration practices;
- condition of the physical plant;
- incident reports;
- potential for emergency and police intervention;
- use of restraint and seclusion;
- performance of fire drills;
- whether adequate food supplies are properly stored;
- provision of specified program services, e.g., clinical, vocational, educational, medical;
- stability of resident placements and turnover;
- involvement of residents in educational programming (for CCFs only); and
- whether resident case records are in compliance with applicable regulations.



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#### **Moving from Provisional to Regular License**

In order to assess a program's readiness to move from a provisional license to a regular license, all of the above-listed areas must be reassessed and taken into consideration. In addition, the Regulatory Consultant shall ensure that all program systems are in place and functioning including:

For child caring facilities and extended day treatment programs:

- treatment planning;
- educational programming (CCFs only);
- completed physical plant renovations;
- recreational programming, including adequate transportation and licensure or certification of staff as required;
- provision of required medical, dental, nursing and psychiatric care;
- case records maintained in compliance with regulations; and
- required staff training in place, including public service licenses as applicable.

For child placing agencies:

- review of approved families' files for compliance with regulations;
  - staff turnover; and
  - status of the physical plant.
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#### **Compliance Monitoring Phase – Quarterly Visits to CCFs**

Each child caring facility shall be visited on at least a quarterly basis by the assigned Regulatory Consultant. During each visit, the Regulatory Consultant shall review the following:

- condition of the physical plant;
- status of program staffing;
- updates from the program management;
- status of outstanding corrective actions based on the previous site visit;
- number of residents in the program; and
- information received regarding complaints or concerns.

Regulatory Consultants shall document all visits to a licensed facility or program including meetings, technical assistance sessions, etc. The visit shall be documented on the Field Visit Reporting form.

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#### **Compliance Monitoring Phase – Unscheduled and Follow- Up Visits**

The Licensing Unit shall make unscheduled visits to licensed facilities and programs to ensure compliance with state regulations and the safety of the children served.

At the discretion of the Licensing Program Manager, a Regulatory Consultant may be assigned to conduct an unscheduled or follow-up visit in response to complaints, reports of suspected abuse or neglect, significant events, critical incidents and the monitoring of corrective action plans. Any visit which involves a Special Investigations Unit investigation shall be coordinated with the investigating social worker so as not to interfere with or contaminate the child protection investigation process.

Examples of conditions which may warrant an unscheduled or follow-up visit are:

Staffing issues:

- below the level required in the licensing application;
- below the level required for medication administration; or
- insufficient staff trained in crisis intervention.

Other issues:

- physical plant conditions which present a health or safety hazard;
- significant deterioration in the condition of the physical plant;
- an increased number of incidents or pattern of incidents, such as AWOLs, restraints, assaults, drug use, property destruction, threatening behavior, self-injurious behavior, police and emergency services intervention, serious staff misconduct, or sexualized behavior, which may indicate that the program is in violation of state regulations;
- any incident which results in serious injury to or death of a child;
- weapons possession by staff or residents; and
- chronic or significant medication administration errors.

**Note:** DCF's Program Evaluation and Development Unit (PEDU) and Congregate Care Unit may also conduct program reviews as a result of any of these conditions. The Licensing Unit shall focus on regulatory compliance and child safety issues, while PEDU shall focus on monitoring, evaluation, focused program review and program enhancement.

**Cross Reference:** [DCF Policy- Chapter 21, "Program Evaluation and Development."](#)

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#### **Non-Compliance Citations and Corrective Action Plans**

The Licensing Unit shall issue non-compliance citations whenever a facility or program is found to be out of compliance with any state regulations.

A facility or program in non-compliance shall promptly submit to the Licensing Program Manager a corrective action plan (CAP) indicating, with sufficient detail and a time line, how it will correct the issue(s) noted and return to full compliance. The CAP shall be signed by the Executive Director or CEO of the agency or program or be sent under a signed cover letter from the Executive Director or CEO.

The Licensing Program Manager shall consult with facility and program management as necessary to ensure that a sufficient CAP is submitted and completed.

Failure of the facility or program to timely and sufficiently implement a CAP may lead to an adverse licensing action.

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#### **Renewal Phase**

Licenses shall be renewed every two years.

Time frames for DCF activity:

- The assigned Regulatory Consultant or the Licensing Unit Administrative Assistant shall send the licensing renewal application packet to the facility or program four months in advance of the license expiration date.
  - An inspection site visit shall be scheduled no less than three months prior to the license expiration date.
  - The inspection report shall be written and mailed to the licensee no less than two months prior to the expiration date of the license. The licensing report shall be sent via email in order to verify when the report was received by the licensee. In addition a hard copy of the report will be sent via standard postal service.
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#### **Renewal Phase (continued)**

##### **Corrective action plans:**

- The licensee shall submit, if required, a corrective action plan (CAP) within 30 days of receipt of the licensing report. The CAP shall be signed by the Executive Director or CEO of the agency or be sent under a signed cover letter from the Executive Director or CEO.
  - If the severity of the regulatory violation(s) is such that the health and safety of residents is at risk, an immediate CAP may be required for repairs, replacements or other temporary measures (such as securing an area to deny access by residents) that eliminate the source of the threat.
  - All CAPs must be implemented by the licensee within the specified time frames required by DCF. Time frames may range from immediate corrective action completed at the time the violations are discovered to time frames ranging from a number of hours to a number of days.
  - Failure to implement the CAP may lead to a summary suspension or other adverse licensing action.
  - If the CAP is accepted by the Department, a new license shall be issued prior to the expiration date of the current license.
  - If elements of the CAP are not acceptable, the licensee shall be notified of the deficiencies in writing within 14 days. The licensee shall be required to submit a revised CAP within 14 days of receipt of the notification.
  - The CAP may be submitted by e-mail or fax for the purpose of meeting the required time frames; however, the facility or program shall also send a hard copy signed by the Executive Director or CEO for placement in the Department's licensing file.
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#### Renewal Phase (continued)

Issuing the license renewal:

A renewed license shall be issued before the expiration date of the current license unless there are outstanding areas of non-compliance that have not been addressed in the CAP process.

- If non-compliance issues remain unresolved 30 days prior to the expiration date of the current license, the Regulatory Consultant or the Licensing Program Manager shall send the licensee a letter stating the date the license will expire and the reason(s) the license has not been renewed.
- If the licensing issues remain unresolved on the date of license expiration, the Department shall not renew the license.
- A letter indicating that the license has expired shall be sent via certified mail to the licensee indicating what adverse licensing action, if any, the Department intends to take and providing the information necessary for the licensee to challenge the decision.

**Note:** Pursuant to Conn. Gen. Stat. [§4-182](#), a licensee may continue to operate with an expired license pending disposition of DCF's licensing action unless the Department proceeds with a summary suspension due to emergency health and safety risks.

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#### Amendments to the License

Amendments are changes to conditions under which a license is issued.

Amendments, including reductions or increases in the licensed bed capacity, a change in the age range of clients or a change in the gender of residents, require the submission of a licensing application and the approval of the Licensing Program Manager.

If amendments to a license are unilaterally imposed by DCF due to regulatory non-compliance, the licensee shall be entitled to an administrative hearing.

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#### Adverse Licensing Actions

Licensing actions are formal unilateral measures taken by DCF which have a direct impact on a licensee's ability to operate or the conditions under which it may operate. Licensing actions include revocations, non-renewals, summary suspensions, unilateral amendments to licenses and the closing of admissions.

**Note:** Suspension of DCF referrals is not an adverse licensing action.

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#### **Procedure**

The Licensing Unit will forward all recommendations for adverse licensing actions to the Agency Legal Director for discussion with the DCF Commissioner. No adverse licensing action shall be taken without the Commissioner's approval.

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#### **Notification of Licensing Actions**

The written notification to the licensee of an adverse licensing action shall include the specific regulations violated, the evidence for those violations, the consultation provided to the licensee to gain compliance, and the rationale for the licensing action. The notification shall be signed by the Agency Legal Director.

The notification shall be sent via certified mail and shall clearly indicate the time frame and method by which the licensee may appeal the decision. Any adverse licensing action taken by the Department is subject to the requirements of the Uniform Administrative Procedures Act, Conn. Gen. Stat. [§4-176e through §4-184a](#) and the administrative hearing procedures set forth in state regulations and DCF policy.

**Cross reference:** [DCF Policy 22-5-2, "License Hearings."](#)

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